

01-R-0681

Entered - 03/15/01 - sb
CL01L0175 - DIANNE C. MITCHELL

CLAIM OF: CNA PERSONAL INSURANCE AS SUBROGEE OF
CATHY AND EDWARD EVINS
P. O. Box 908
Manmouth Junction, NJ 08852

For damages alleged to have been sustained as a result of a vehicular accident on January 3, 2001 at 22 Walker Terrace, NE.

BY PUBLIC SAFETY AND
LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to CNA PERSONAL INSURANCE AS SUBROGEE OF CATHY AND EDWARD EVINS the sum of \$2,000.00 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a vehicular accident on January 3, 2001 at 22 Walker Terrace, NE as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD
CITY ATTORNEY

BY: 
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0175

Date: April 2, 2001

Claimant /Victim CNA PERSONAL INSURANCE AS SUBROGEE OF CATHY AND EDWARD EVINS
BY: (Atty)(Ins. Co.)

Address: P. O. Box 908, Monmouth, NJ 08852

Subrogation: X Claim for Property damage \$ 2,733.17 Bodily Injury \$

Date of Notice: 03/14/01 Method: Written, proper X Improper

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 01/03/01 Place: 22 Walker Terrace, NE

Department Fire Division:

Employee involved Demetrius L. Houston Disciplinary Action: 12 Hour Suspension

NATURE OF CLAIM: The driver of the City vehicle misjudged his clearance and struck the claimant's vehicle causing damages in the above amount.

INVESTIGATION:

Statements: City employee _____ Claimant _____ Others _____ Written _____ Oral _____

Pictures _____ Diagrams _____ Reports: Police X Dept Report X Other _____

Traffic citations issued: City Driver _____ Claimant Driver _____

Citation disposition: City Driver _____ Claimant Driver _____

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial _____

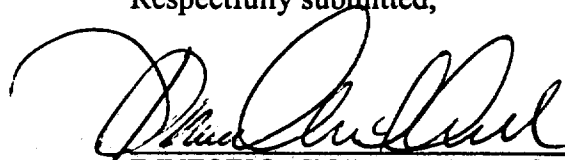
Improper Notice _____ More than Six Months _____ Other _____ Damages reasonable _____

City not involved _____ Offer rejected _____ Compromise settlement X

Repair/replacement by Ins. Co. _____ Repair/replacement by City Forces _____

Claimant Negligent _____ City Negligent X Joint _____ Claim Abandoned _____

Respectfully submitted,



INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

Pay \$ 2,000.00 Adverse _____ Account charged: 1A01 X 2J01 _____ 2H01 _____

Claims Manager:  Concur/date 03-02-01

Committee Action: _____ Council Action _____

CNA PERSONAL INSURANCE

Subrogation Center, P.O. Box 908, Monmouth Junction, NJ 08852

www.cnaperins.com

Charlene Neal

Subro Claims Rep

Telephone

(732) 398-4139

(800) 260-1454 x4139

Facsimile

(732) 398-5009

Internet

charlene.neal@encompassins.com

March 1, 2001

CITY OF ATLANTA
ACCIDENT REVIEW BOARD
23 CLAIR DR.
ATLANTA, GA. 30315

ENTERED - 3-15-01 - SB
01L0175 - DIANNE MITCHELL

Our Claim Number: P8138285 BF
Your Reference Number: .
Your Insured: City of Atlanta
Our Insured: Cathy & Edward Evins
Location of Loss: Atlanta, GA
Date of Loss: 01/03/2001
Insuring Company: Continental Ins Co

Dear Mr. Cox :

This letter is formal notice of our subrogation rights with regards to the above captioned matter. Our investigation indicates that liability rests with your insured.

We have enclosed all supporting documentation substantiating our subrogation demand in the amount of \$2,733.17 which includes our insured's 250 deductible. Please include our claim number on your check made payable to Continental Ins Co as subrogee of Cathy & Edward Evins.

If you should have any questions, please contact the undersigned. Thank you for your cooperation

Very truly yours,

Charlene Neal

Enc: File Documentation

GENERAL RELEASE AND INDEMNIFICATION

CLAIM NUMBER 01L0175

\$ 2,000.00

IN CONSIDERATION of the sum of TWO THOUSAND AND NO/100
 DOLLARS, to be paid to me by the CITY OF ATLANTA, the future receipt of which is hereby
acknowledged, I do hereby, for myself, my heirs, executors, administrators, and assigns, release and forever
discharge said City, its officers and employees, including but not limited to Demetrius L. Houston, from any and
all claims, demands, actions, causes of action, suits, damages, loss and expenses, of whatsoever kind or nature for
or on account of anything that has heretofore occurred, and particularly for or on account of a vehicular accident

which occurred on or about the 3rd day of December, 2001,

at or near 22 Walker Terrace, NE

It is further understood and agreed that the payment of the above named sum is not to be considered as an
admission on the part of the City, its officers, agents, servants or employees, of any liability whatsoever and the
undersigned further covenants and agrees to indemnify and hold harmless the City of Atlanta, its officers, agents,
servants and employees, from any and all claims, damages or costs which the said City of Atlanta, its officers,
agents, servants and employees, may be called upon to make as a result of the event hereinbefore referred to.

And I now state that the only consideration for my signing this release and indemnification is the payment
of the sum stated above; that no other promise or agreement of any kind or nature has been made to or with me by
said City or its agents to cause me to sign this release, and that I fully understand the meaning and intent of this
instrument.

WITNESS my hand and seal this 27th day of March, 2001.

Charlene Neal (LS)
CNA PERSONAL INSURANCE AS
SUBROGEE OF CATHY AND EDWARD EVINS

The above release was read and explained to, and signed by the said _____

_____ in our presence on the date above written.

Shirley G. Lewis

SHIRLEY ANN LEWIS
NOTARY PUBLIC OF NEW JERSEY
MY COMMISSION EXPIRES NOV. 12, 2002

Witnesses

01- -0681

10:00:00

04:10:14